UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	00862.023182
First Name	d Inventor or Application Identifier
MICHIHARU SHOJI	
Evoress Mail Label No.	

(2) is nonpri			Express Mail I	Label No.			
	PLICATION ELEMEI concerning utility patent ap		ADDR	ESS TO:	Commission P.O. Box 1	Patent Application oner for Patents 450 , VA 22313-1450	
1. X Fee Transmit (Submit an original)	tal Form ginal, and a duplicate for fee p	rocessing)	7.	CD-ROM or Program (A)	•	large table or Computer	
2. Applicant clair See 37 CFR	aims small entity status. 1.27.		8.		ucleotide and/or Amino Acid Sequence Submission ppplicable, all necessary)		
3. X Specification	Total Pa	ges 51		a C	omputer Readable	Form (CRF) CRF)	
4. X Drawing(s) (3	35 USC 113) Total Sh	eets 13			ition Sequence Listi CD-ROM or CD-R (ing on: 916 / 10 / 10 / 10 / 10 / 10 / 10 / 10 /	
5. X Oath or Deck	aration Total Pa	ges 1		ii ţ	paper		
a. X Ne	wly executed (original or co	py)				identity of above copies	
h 0a		(27.0ED 4.62(4))		ACCOM	PANYING APPLIC	ATION PARTS	
1 1	py from a prior application (r continuation/divisional with	` ',,	9. X	Assignment	Papers (cover sheet	& document(s))	
i. [DELETION OF IN\ Signed Statement at		10.		(b) Statement is an assignee)	Power of Attorney	
	inventor(s) named in 37 CFR 1.63(d)(2) a	the prior application, snd 1.33(b).	11.	English Trar	nslation Document	(if applicable)	
6. X Application D	ata Sheet. See 37 CFR 1.	76	12.	Information I Statement (I	Disclosure DS)/PTO-1449	Copies of IDS Citations	
			13.	Preliminary /	Amendment		
			14. X		eipt Postcard (MPE specifically itemized		
			15.		py of Priority Docun io <i>rity is claimed</i>)	nent(s)	
			16.	Other:			
17. If a CONTINUING	APPLICATION, check app	ropriate box and sup	oly the requisite in	formation:			
	Continuation Divisional Continuation-in-part (CIP) of prior application No/ Group/Art Unit:						
considered a part of the o	R DIVISIONAL APPS only: The secompanying of the accompanying of the accompanying the has been inadvertently the second of the se	ng continuation or divis	sional application a	nd is hereby inc	an oath or declaratio corporated by referer	on is supplied under Box 5b, is noce. The incorporation can only	
		18. CORRES	PONDENCE ADD	RESS			
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below						spondence address below	
NAME							
1.202							
Address							
City		State			Zip Code		
Country		Telephone			Fax		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	21-20 =	1	X \$ 18.00 =	\$18.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	1-3 =	0	X \$ 84.00 =	\$0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$280.00 =				\$0.00
				BASIC FEE (37 CFR 1.16(a))	
			Total of	above Calculations =	\$768.00
	Reduction by	50% for filing by small er	ntity (Note 37 CFR 1.9,	1.27, 1.28).	
				TOTAL =	\$768.00
19. Sr a.	nall entity status A small e	ntity statement is enclose	ed		
	A small e A small e and desir	ntity statement was filed ed. per claimed.	in the prior nonprovision		ch status is still prope
a. b. c.	A small e A small e and desire Is no long	ntity statement was filed ed. per claimed.			ch status is still prope
a. b. c. 20.	A small e A small e and desire Is no long	ntity statement was filed ed. per claimed. punt of \$ 768.00 to	in the prior nonprovision	nclosed.	ch status is still prope
a. b. c. 20 21	A small e A small e and desire Is no long X A check in the ame	ntity statement was filed ed. per claimed. punt of \$ 768.00 to	in the prior nonprovision cover the filing fee is en	nclosed. s enclosed.	
a. b. c. 20 21	A small e A small e and desir Is no long X A check in the amount X A check in the amount Commissioner is hereb 0.06-1205	ntity statement was filed ed. per claimed. punt of \$ 768.00 to	in the prior nonprovision cover the filing fee is er cover the recordal fee is erpayments or charge the	nclosed. s enclosed.	
a. b. c. 20 21 22. Th	A small e A small e and desir Is no long X A check in the amount A check in the amount Commissioner is hereb Commissioner is hereb	ntity statement was filed ed. per claimed. punt of \$ 768.00 to punt of \$ 40.00 to by authorized to credit over	in the prior nonprovision cover the filing fee is er cover the recordal fee i erpayments or charge the	nclosed. s enclosed.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Mark A. Williamson - Reg. No. 33,628			
SIGNATURE	Mach Owlling			
DATE	August 2+, 2003			

MAW/kkv DC_MAIN 141970 v 1